General Law Committee Room 3500, Legislative Office Building Hartford, CT 06106

Re: Written Testimony in Support of HB 6918, An Act Concerning Changes to Prescription Drugs Dispensed to Certain Patients

Submitted electronically to: gltestimony@cga.ct.gov

**Dear Committee Members:** 

On behalf of the Coalition of State Rheumatology Organizations (CSRO) and the Connecticut Rheumatology Association (CRA), we thank you for the opportunity to voice our strong support of HB 6918, which protects patient safety by requiring prescriber consent and a medical basis prior to any change in the prescription drug dispensed to certain patients.

CSRO is a national organization composed of over 30 state professional rheumatology societies, including CRA, formed in order to advocate for excellence in rheumatologic care and to ensure access to the highest quality care for patients with rheumatologic and musculoskeletal disease. Rheumatologists are entrusted with the safe care of patients with rheumatoid arthritis and other autoimmune diseases that require the careful choice of safe and effective pharmaceutical and biological therapies.

Patients who are stable on a therapeutic regimen should not be switched to another therapeutic regimen unless the doctor and patient together decide it is the right medical decision for that individual. In the best interest of patient safety, pharmacists should not be permitted to switch a stable patient from one therapy to another for non-medical reasons.

Achieving disease control in rheumatoid arthritis, for instance, is often a difficult process and may require switching medications a number of times to find one that is effective and successful in achieving a low disease activity state or remission. Forcing patients to discontinue an effective medication regimen and switch to another agent for strictly financial purposes is unacceptable. Not only does it pose the potential for losing disease control, which can result in progression and disability, this kind of arbitrary policy totally disregards the variability of individual responses to different medications. Arbitrarily forcing this type of change only makes it more difficult to care for patients with rheumatoid arthritis effectively. Additionally, it is a serious violation of medical ethics.

We believe that every patient currently being treated and stable on their medication has the right to continue with their therapy. Therefore, we strongly support HB 6918, which addresses this issue by providing that if a pharmacist has been informed that a patient is medically stable and diagnosed with a complex or chronic medical condition or a rare medical condition, the pharmacist may not change the drug prescribed to the patient